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REPORT OF A MEDICO-LEGAL CASE

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It is only very recently that it has been recognized that moral obliquity and certain errors in conduct, especially during adolescence, not infrequently have a definite pathological, and some times, a correctible basis. I recall illustrative cases in my experience, among them some with abnormal pituitary conditions who committed certain overt acts, sexual or otherwise. There have been, also, some cases of head injury in which the conduct was altered by the injury and the same has been noted after certain diseases, especially meningitis. Two of the injury cases might be briefly mentioned. One boy who had been arrested repeatedly for theft and incorrigibility, went swimming, dived, struck his head on a rock and sustained a fracture of the skull from which cerebrospinal fluid is supposed to have drained. His whole character and disposition seemed to change after the accident to the extent that he became apparently normal. Another youth who was thought to be an exceptionally bad character had a decompression operation performed after a skull injury and there was a complete change in his personality. He served with distinction as an officer in the world war.

Investigations at Sing Sing and elsewhere disclosed the fact that a large per cent of the prisoners were feeble-minded, epileptic, insane or had definite skull injuries. It is not only wise but just, therefore, that those who commit overt acts should have a thorough and skilled medical examination with a view to establishing their responsibility.

I have no quarrel with the gentlemen of the legal fraternity except to state that they underestimate the value of competent medical opinion in their criminal practice unless the expert is avowedly testifying for "their side." It should be a general custom for a commission of neuro-psychiatrists to pass on every case when the question of mental responsibility arises—nay, I shall go even further and say on every case. This commission should be appointed by the court rather than by the prosecution or the defense.

In the case presented for consideration here the patient, a member of a prominent family, was a student at the University of Vir-

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ginia when he was arrested for setting fire and burning down the laboratory of the university and appropriating \$2,500 worth of platinum. This young man was arrested in March, 1917, the arson and larceny having taken place on January 26, 1917. A few days after his arrest he was brought to the Tucker Sanatorium. He underwent three hard fought trials in Charlottesville, in each of which there was a hung jury. After the last trial the indictment was quashed and he was committed to Southwestern State Hospital Department for Criminal Insane for care and observation. Here he remained for four months until released on a habeas corpus upon the statement of Dr. Henderson, the superintendent, and his assistants and also the writer, who examined him carefully twice while he was there, that he was during his stay entirely sane in every respect. A brief summary of the case is as follows:

There was a history of his mother having had an unusually long labor, and the child having an unusually large head. Photographs taken during childhood show a decided degree of hydrocephalus. During early childhood he developed rickets, for which he had to wear braces. As he grew up he was unaffectionate and undemonstrative, reserved and not sociable. He never enjoyed the usual boys' games, nor had any fist fights. He was rather effeminate, fond of flowers and indifferent to both sexes.

At school he was irregular in his studies, often truant, and was known to have pilfered from various sources. Twice during childhood he had scalp wounds from blows on the head. In both instances the wounds were closed with stitches. In the fall of 1911 he went to the Episcopal High School. While there he had frequent spells of vertigo. During one of these he fell on the bathroom floor, became unconscious for over twelve hours, and had many convulsions. He was taken to Johns Hopkins hospital and was operated on by Dr. Harvey Cushing, who performed a right sub-temporal decompression operation without drainage. Increased intracranial pressure was found and he made an uneventful operative recovery. After this he went to McGuire's School in Richmond. While there he had to be given his examinations alone, because in the examination rooms he could not pass them, but when alone, with the teacher furnishing the will power, as Mr. McGuire expressed it, he could usually make fairly good marks. His conduct toward his teachers and friends was noticeably abnormal. He was seclusive at periods. He had spells of wandering off, and he would tell no one where he had been. He would set fire to whole boxes of matches in the stands on tables of fashion-

able restaurants, and would burn holes in damask table clothes with cigarettes. During this time he acknowledged taking platinum from a large concern, feeling, he said, an impulse to do so.

In the fall of 1915 he went to the University of Virginia. While there his conduct was noted to be unusual. He would take unexplained trips to Charlottesville, would sit at times gazing with a peculiar stare, at times he was morose, and the general impression among his college mates was that he was "peculiar," "strange," "crazy." He went home Christmas, refused to see his friends, was morose and oftentimes drowsy. While at the University his class marks showed great irregularity and he took clothing which did not fit him and gave it away to people he did not know. He stole watches and melted them up for experimental purposes, and other articles, making a very feeble attempt to cover up these thefts.

In January, 1917, he took platinum from the University laboratory, valued at several thousand dollars and set fire to the building, giving notice himself of the fire to the authorities. He came under my charge on March 6th, and was observed at the Tucker Sanatorium until the day before his operation, April 14, 1917. My examination of him at this time revealed a pasty skin, the right side of his face slightly contracted, and his knee jerks exaggerated, especially the right. Examination of his eyes showed blurring of the discs. His pulse was subnormal, going as low as 45 beats per minute, and never normal except one day when under some excitement it went to 80. His temperature was subnormal, ranging from 96.8 to 98.6. His blood pressure was subnormal, being 100 systolic and 58 diastolic. A lumbar puncture revealed that he had cerebrospinal fluid pressure of 20 m. m. of mercury, that is, nearly three times what the normal pressure should be. His head was rather large, and he wore a number 7¼ hat although he only weighed 141 pounds and was only 5 feet 8¼ inches in height. An X-ray by Dr. Gray disclosed a calcified area at the vertex, ridges and furrows at the vault of the skull from increased intracranial pressure, and an ingrowth of bone ½ to ¾ inches long at the site of Dr. Cushing's operation. A mental test by Miss Peterson, superintendent of the Virginia Industrial Home for Girls, showed irregularities, and she was struck throughout the test with the vagueness of his ideas. A general mental examination by Dr. James K. Hall of Westbrook Sanatorium and myself showed that he was unemotional, unappreciative of the enormity of his actions, unashamed and childishly frank. He talked of the most distressing things in a pleasant way. His attitude towards the com-

mission of thefts and fire at the university was that he was controlled by an impelling influence. He stated that between the impulses to steal he felt no temptation. He had no idea as to what his future would be. The thought complex was very superficial. He was not worried about the expense to which his family was put nor the disgrace. He explained his sudden trips by irresistible impulses to go. We could get no evidence of his having been dissipated to any extent or of having kept bad company. The diagnosis of chronic external hydrocephalus causing wanderlust, pyromania and kleptomania was made.

Dr. J. C. King, Dr. A. S. Priddy, Dr. W. T. Oppenheimer and myself were either witnesses or examiners in a commission of lunacy held during the latter part of March and he was found to be insane and irresponsible.

Dr. William Sharpe of New York, at my suggestion examined him on April 6, 1917, and agreed with me in the diagnosis. He operated on him at the Johnston-Willis Hospital on April 14, 1917, and the cerebrospinal fluid was found under greatly increased pressure and an angiomatous plexus of much dilated veins, some as large as a lead pencil, was found on the left side of the brain. Four linen drains were inserted to draw the fluid within the dura out under the temporal muscles to be absorbed. A permanent channel is thus frequently formed. It was the general opinion of those who saw the operation—Dr. Sharpe, Dr. Emmet, Dr. A. M. Willis, Dr. Oppenheimer and myself—that there was very definite brain pathology. The angiomatous blood vessels were interpreted as being the organization of a hemorrhage which occurred at birth.

Since this operation I have examined the patient frequently. His blood pressure has come up to normal, his spinal fluid has gone down to normal, that is, 7 m. m.'s of mercury, his temperature has been normal, his optic discs are normal, his pulse is normal, and his mental and emotional reactions are entirely normal. These observations have been made in the intervals when on bail through three court trials and during his residence at the Southwestern State Hospital and since. I have also noted that he has become concerned and appreciates the enormity of his acts, that he is observant and responsive, and that his affections and demonstrations toward his family and friends have been everything that could be asked. His insight into his past condition is now excellent and his conduct has been exemplary.

It therefore appears that this young man was mentally and morally insane and irresponsible for criminal acts before his operation in April, 1917, because of a pathological condition of his brain and that since the operation he has recovered his mind and responsibility and has been in a normal condition for now over three years.